

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Haire	JC 19	03-13-01
O.I.P.E. CLASSIFIER			3/23/01
FORMALITY REVIEW	MM	780	4-9-01
RESPONSE FORMALITY REVIEW	HA	858	6/27/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 -: ..... Restricted O ..... Objected

Claim	Date
1	Original
1	Final 2/13
2	
3	
4	✓ 4/23
5	
6	0
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8	✓ 4/23
9	0
10	✓ 4/23
11	✓ =
12	✓ -
13	✓ -
14	✓ -
15	✓ -
16	0
17	✓ -
18	✓ -
19	✓ -
20	✓ -
21	✓ -
22	0
23	✓ =
24	✓ -
25	✓ -
26	✓ -
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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C.C.  
04/10/01